## Note: Please print this page and use it as a cover sheet. Type the fax audit

(((H15000077028 3)))

number (shown below) on the top and bottom of all pages of the document.



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name

: LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019

Phone

: (305)552-5973

Fax Number

: (305)675-5944

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

	Address:		
-67	Aduress:		

## FLORIDA PROFIT/NON PROFIT CORPORATION IMAGING NATION DIAGNOSTICS, CORP.

Certificate of Status	0	
Certified Copy	1	
Page Count	03	
Estimated Charge	\$78.75	

MAR 3 0 20016

T. SCOTT

Electronic Filing Menu

15 附3 27

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLET NAME: The name of the corporation is:

TAXALLE THE MAIN OF THE OUTPORT OF
Imaging Nation Diagnostics, Corp.
ARTICLE II PRINCIPAL OFFICE:
The principal street address and mailing address is: 1106 Columbus Blvd
Coral Gables, Florida 33134
ARTICLE III SHARES: The number of shares of stock is: 100
ARTICLE IV INITIAL DIRECTORS AND/OR OFFICERS:
RICARDO ALFONSO (9)
51 31 32 30
27 27
PH 12:
ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS:
The name and Florida street address (PO Box not acceptable) of the registered agent is:  RICORD ALFONSO
1106 Columbus Blvd.
Coral Gables FL 33134
ARTICLE VI INCORPORATOR: The name and address of the Incorporator is:
Ricardo Alfonso.
1106 Columbus Blvd
(mal Gables FL 33124

## Required Signatures:

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

1/01

Registered Age

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Ticoporato:

Date